

MI7000007033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

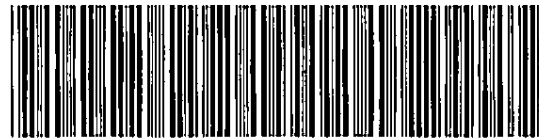
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

cert. WI7-59754
RA sign (name)

Office Use Only



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07/17/17--0102S--010 **125.00

FILED
17 AUG 14 PM 4:11
CLERK OF DISTRICT COURT
STATE OF FLORIDA

S. WARREN

AUG 16 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 19, 2017

CRAIG A. SHERWOOD
STIFEL FINANCIAL CORP
501 N. BROADWAY
ST. LOUIS, MO 63102

SUBJECT: ZIEGLER CAPITAL MANAGEMENT, LLC
Ref. Number: W17000059754

We have received your document for ZIEGLER CAPITAL MANAGEMENT, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 617A00014648

STIFEL

Investment Banking

July 25, 2017

Stacey M Warren
Divisions of Corporations
PO BOX 6327
Tallahassee, FL 32314

SUBJECT: ZIEGLER CAPITAL MANAGEMENT, LLC
Ref Numbers: W17000059754

Enclosed you will find a "Application by Foreign LLC For Authorization to Transact Business in FL," signed by the designated registered agent and a certificate of existence or good standing dated no more than 90 days.

Please contact me at 314-342-7301 or by mail, if there are any issues with the processing of this request

Sincerely,

Craig Sherwood
Director, Tax Compliance and Reporting
Stifel Financial Corp.
One Financial Plaza
501 North Broadway
St. Louis, MO 63102
Ph.: 314-342-7301

RECEIVED
2017 AUG 15 AM 10:32
STIFEL FINANCIAL CORP
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ziegler Capital Management, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Craig A. Sherwood

Name of Person

Stifel Financial Corp.

Firm/Company

501 N. Broadway

Address

St. Louis, MO 63102

City/State and Zip Code

McNairJ@Stifel.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Craig Sherwood

314

342-2000

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Ziegler Capital Management, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
- (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. Wisconsin
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 27-2347077
(FEI number, if applicable)
4. 01/01/2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 5121 Kensington High Street
Naples, FL 34105
(Street Address of Principal Office)
6. Stifel Financial Corp. Attn: Tax Department
501 N. Broadway, St. Louis, MO 63102
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System
By: James M. Halpin, Assistant Secretary Jan M Halpin
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

PLEASE SEE ATTACHED

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Scott A Roberts
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SCOTT A. ROBERTS
Typed or printed name of signee

Exhibit A

Officers and Authorized Signatories effective as of the date hereof, unless otherwise stated

Name	Title
Scott A. Roberts	President and Chief Executive Officer
Paula M. Horn	Chief Investment Officer
Cynthia T. Perez	Chief Operating Officer
Elizabeth A. Watkins	Chief Compliance Officer
Michael C. Chien	Chief Legal Officer
Renee M. Ansbro	Chief Financial Officer
John K. Brinckerhoff	Senior Managing Director, Sales

FILED
17 AUG 14 PM 4:11
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
FBI - MIAMI

United States of America
State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, Mary Ann McCoshen, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

ZIEGLER CAPITAL MANAGEMENT, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is May 3, 2005.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on July 31, 2017.

A handwritten signature in black ink that reads "Mary Ann McCoshen".

MARY ANN MCCOSHEN, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions



DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>

Enter this code: 201586 42401607